

Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2024

Approved Centre Name:

CREAGH SUITE

| The total number of persons that the centre can accommodate at any one time | 8 |
|---|---|
| The total number of persons that were admitted during the reporting period | 4 |

Rules Governing the Use of Seclusion

Issued Pursuant to Section 69(2) of the Mental Health Act 2001-2018.

| The total number of persons who were secluded during the reporting period | 0 |
|---|-----|
| The total number of seclusion episodes | 0 |
| The shortest episode of seclusion | n/a |
| The longest episode of seclusion | n/a |

| A statement about the effectiveness of the approved centre's actions to reduce or, where possible, eliminate the use of seclusion |
|---|
| No seclusion room/seclusion not utilised |
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| |

| A statement about the approved centre's compliance | with the rules |
|--|-----------------------|
| governing the use of seclusion | Charles in the prices |

Staff aware of rules governing seclusion and training completed.

A statement about the compliance with the approved centre's own reduction policy

No seclusion room/seclusion not utilised



Code of Practice on the Use of Physical Restraint

Issued Pursuant to Section 33(3)(e) of the Mental Health Act 2001-2018

| The total number of persons who were physically restrained during the reporting period | 0 |
|--|-----|
| The total number of episodes of physical restraint | 0 |
| The shortest episode of physical restraint | n/a |
| The longest episode of physical restraint | n/a |

A statement about the effectiveness of the approved centre's actions to eliminate, where possible, and reduce physical restraint

No episodes of physical restraint utilised in this period. Quarterly review of restrictive practice with MDT/ restrictive practice reduction group, with monthly review of restrictive practice at team meetings and weekly review at MDT meetings.

A statement about the approved centre's compliance with the code of practice on the use of physical restraint

No episodes of physical restraint utilised in this period. Quarterly review of restrictive practice with MDT/ restrictive practice reduction group, with monthly review of restrictive practice at team meetings and weekly review at MDT meetings. Staff aware of code of practice and training completed.

A statement about the compliance with the approved centre's own reduction policy

Utilisation of safewards techniques, regular review of behaviours and management by MDT, utilisation of sensory equipment, music therapy, outdoor spaces.

Rules Governing the Use of Mechanical Means of Bodily Restraint

Issued Pursuant to Section 69(2) of the Mental Health Act 2001-2018.

| The total number of persons who were mechanically restrained under Part 3 (Immediate Risk of Harm) | 0 |
|--|---|
| The total number of episodes of mechanically restrained under Part 3 (Immediate Risk of Harm) | 0 |
| The shortest episode of mechanically restraint under Part 3 (Immediate Risk of Harm) | |
| The longest total episode of mechanically restraint Part 3 (Immediate Risk of Harm) | 0 |
| The total number of persons who were mechanically restrained (Part 4: enduring risk of harm to self or others) | 3 |

A statement about the effectiveness of the approved centre's actions to reduce and, where possible, eliminate mechanical means of bodily restraint

Quarterly review of restrictive practice with MDT/ restrictive practice reduction group, with monthly review of restrictive practice at team meetings and weekly review at MDT meetings.

Regular assessment of affected persons by Physiotherapy, to assess degree of falls risk and if restraint still required.

A statement about the approved centre's compliance with the rules governing the use of mechanical means of bodily restraint

Staff aware of rules and training completed.

A statement about the compliance with the approved centre's own reduction policy

Reduction of use balanced against risk to service users of falls/physical injury. Families informed and encouraged to support service user through process.



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Signed by Registered Proprietor Nominee:

*If you do not have a Digital Signature, typing your name will/be accepted as your signature.